

Massachusetts Performance Management Initiative; ATS Pay-for-Performance Project



**State Systems Development
Program
August 2008**

Process of P4P - Element of An Effective QI Partnership*



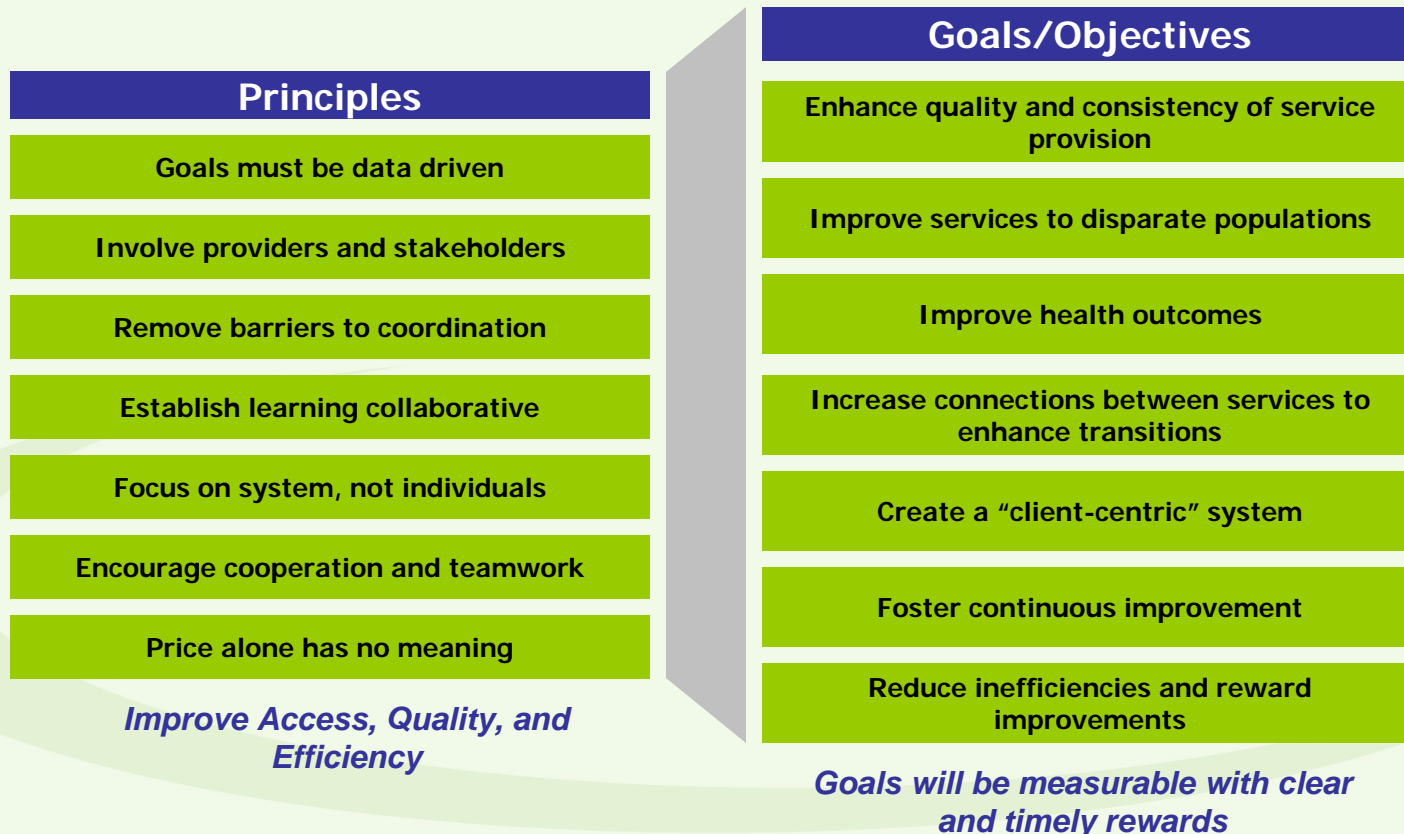
- Good Data
- Positive Relationships
- Quality Orientation
 - Continuous Learning
 - Process Improvement
- Incentives to Improve

*Network for Improvement of Addiction Treatment (NIATX)

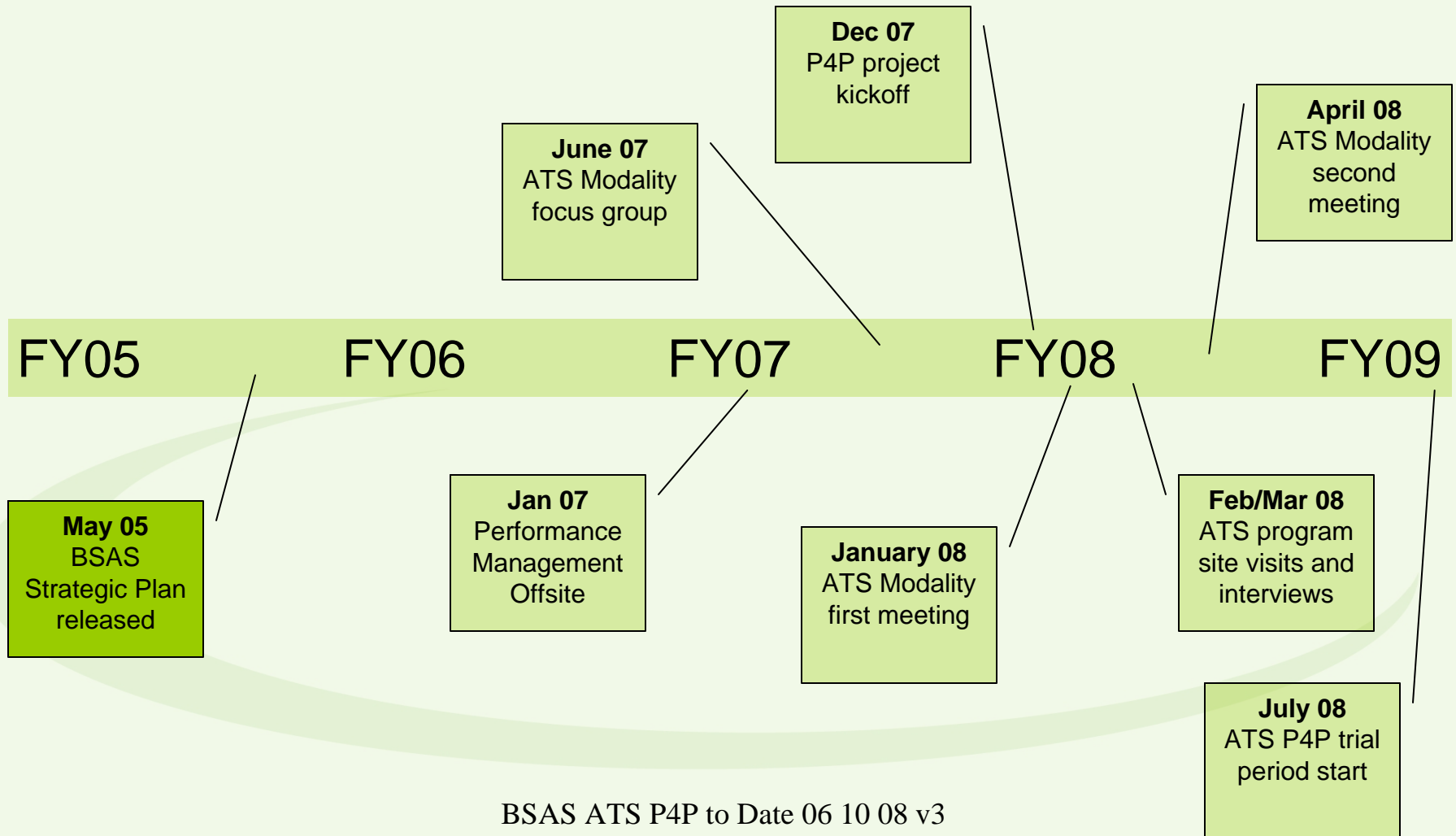
Pay for Performance Principles & Objectives



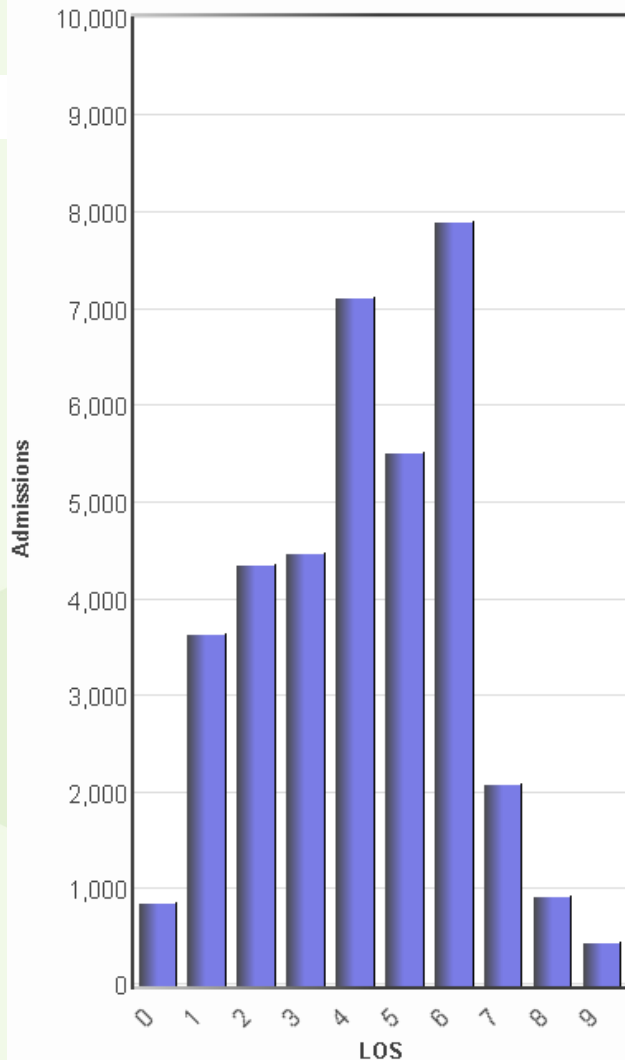
Innovative, Pragmatic, Incremental, Evidence-based



Timeline



FY07 Admissions by Length of Stay



Admission Observations

- Spikes at 4 and 6 days reflecting alcohol and opioid protocols respectively.
- Significant drop off after 6 days
- ~40% of clients did not make it to 4 days of treatment

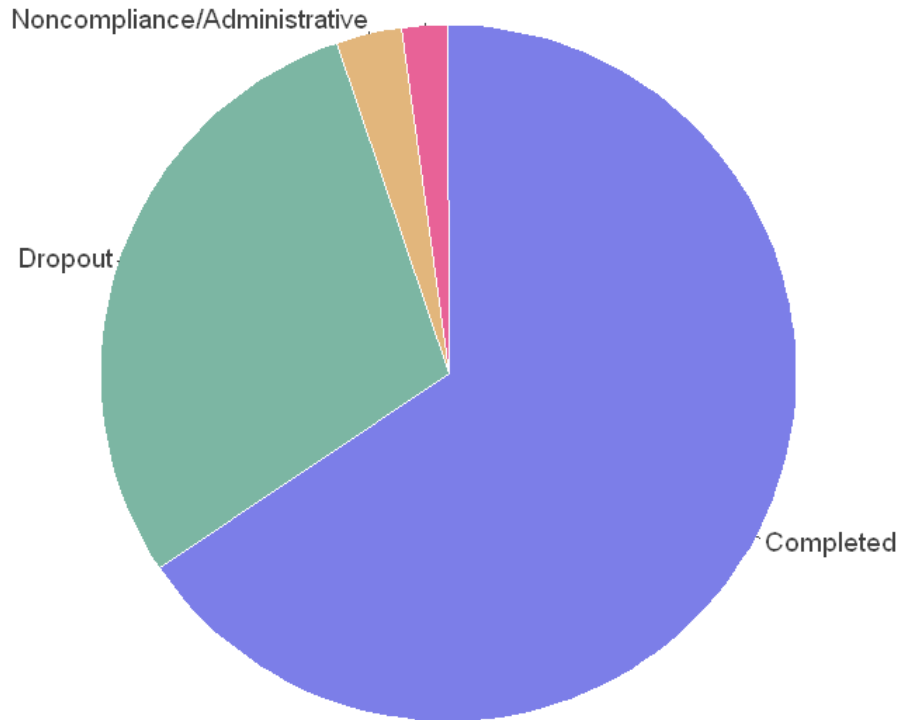
Admissions Included in Study

- 39,805 ATS Admissions overall
 - 37,310 Admissions in Study
- Admissions with submitted discharge dates and LOS between 0 and 9 days.

FY07 Admissions by Discharge Reason



Discharge Reason Observations



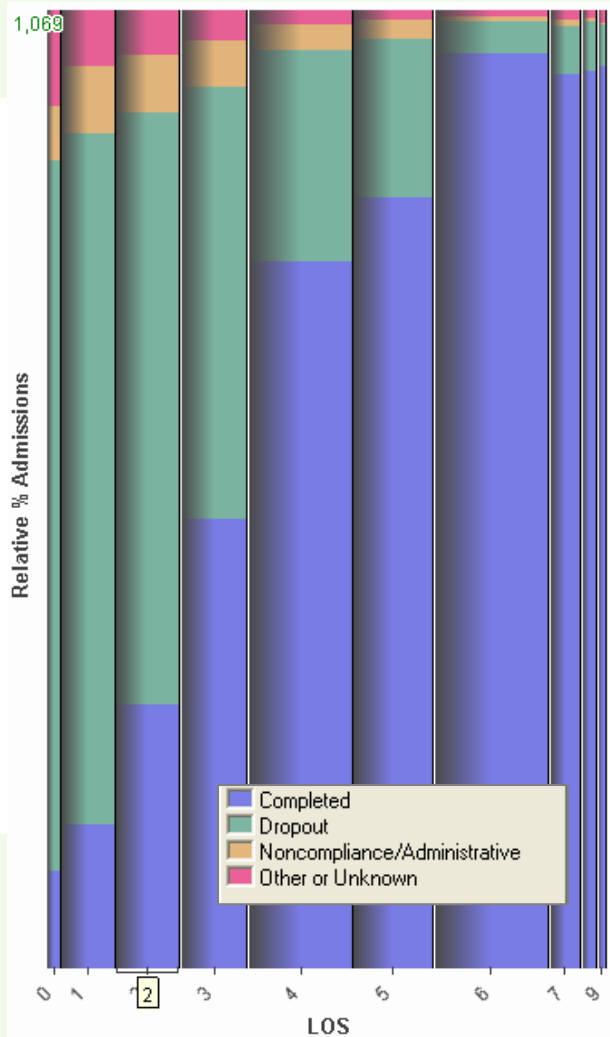
65% Completed

30% Dropout

3% Noncompliance/Administrative

2% Other

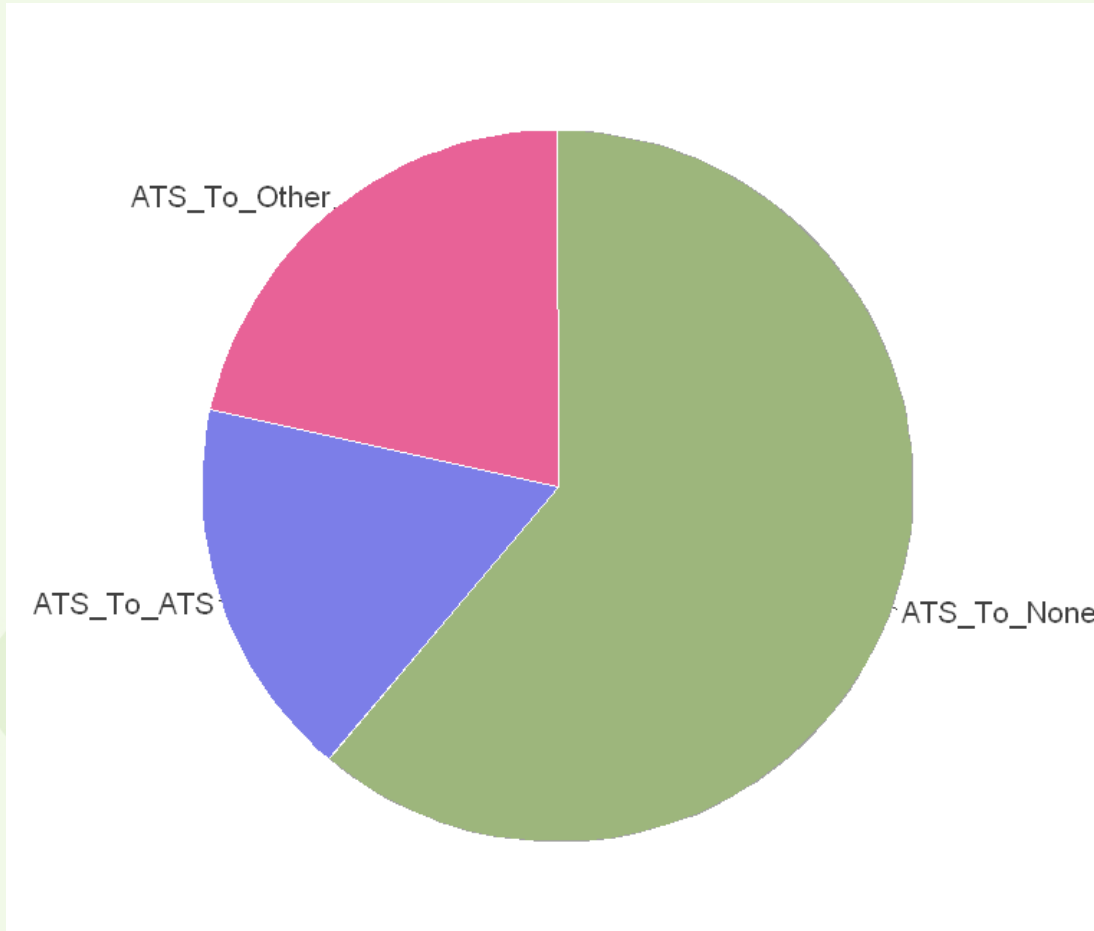
FY07 Discharge Reason over LOS



Discharge Reason by LOS Observations

- 5-10% of admissions do not have a discharge reason reported
- As LOS increases the proportion of clients dropping out (green) decreases

FY07 Post ATS Care within 14 Days



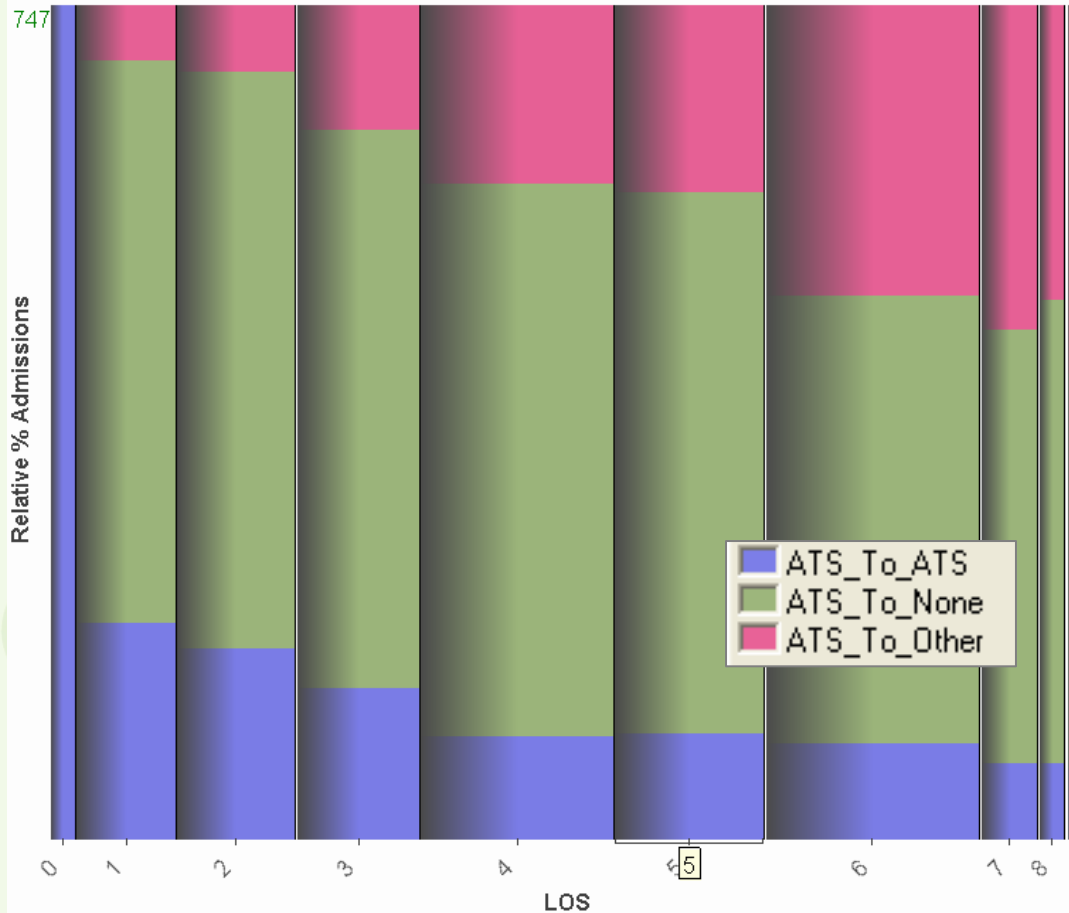
Transition Observations

17% ATS to ATS

21% ATS to Other Treatment

62% ATS to No Treatment

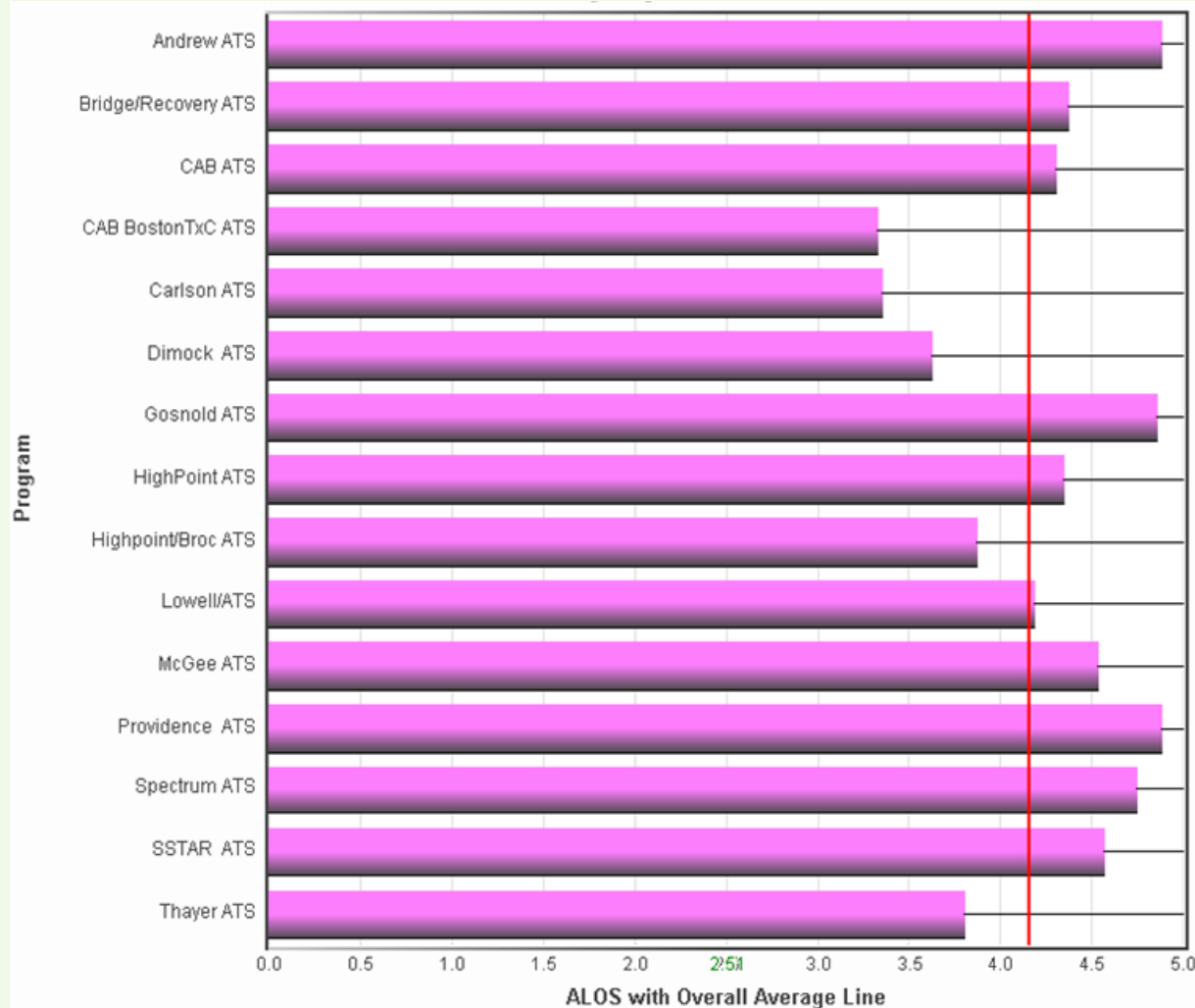
FY07 Post ATS Care within 14 Days



Transition Observations

- Longer LOS results in greater chance of moving to the next level of care
- Percentage of clients transitioning to other care increases with LOS (to ~30%).
- Percentage of clients returning to ATS decreases with LOS.

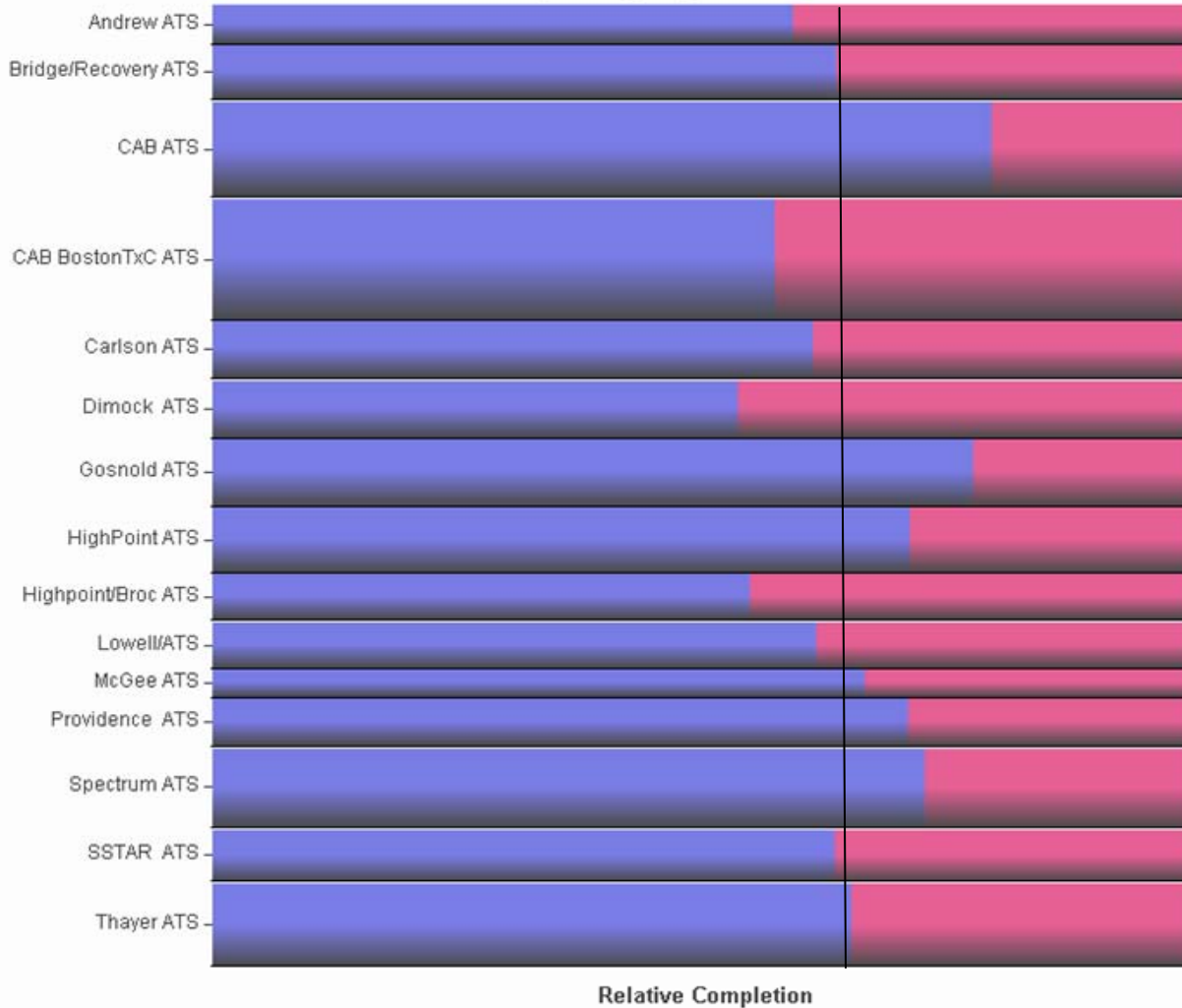
FY07 Average LOS by Program



LOS by Program Observations

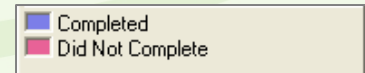
Overall ALOS = 4.16 Days

FY07 Treatment Completion by Program



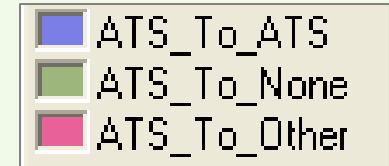
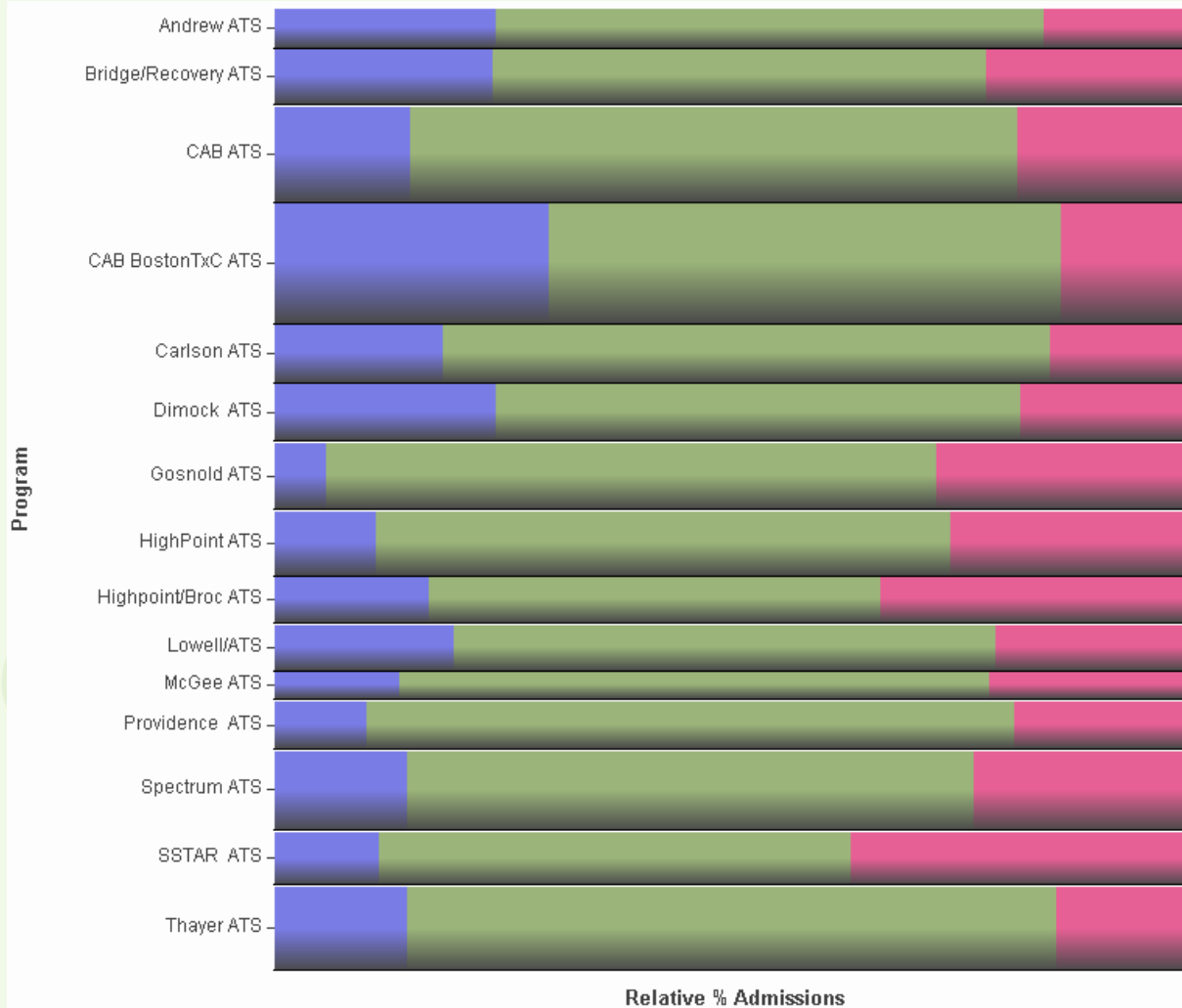
Completion Observations

Overall Completion Rate is 65%



Note: width of band on spline plot indicates the relative number of admissions (n).

FY07 14-Day Post ATS Transition By Program

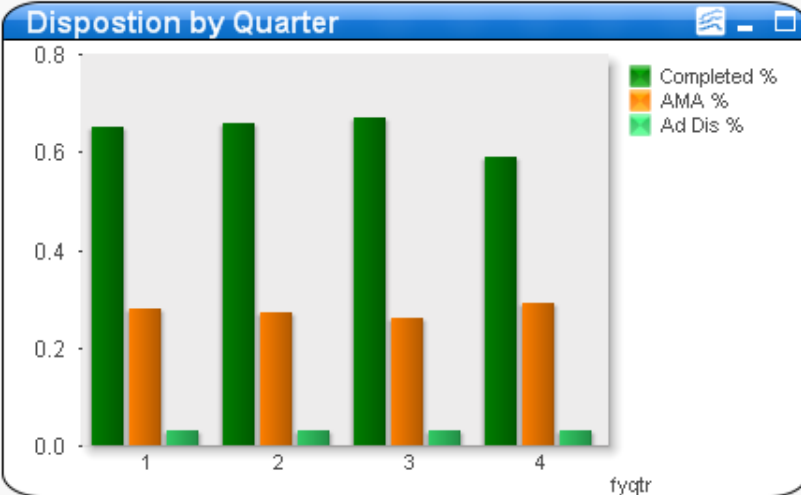
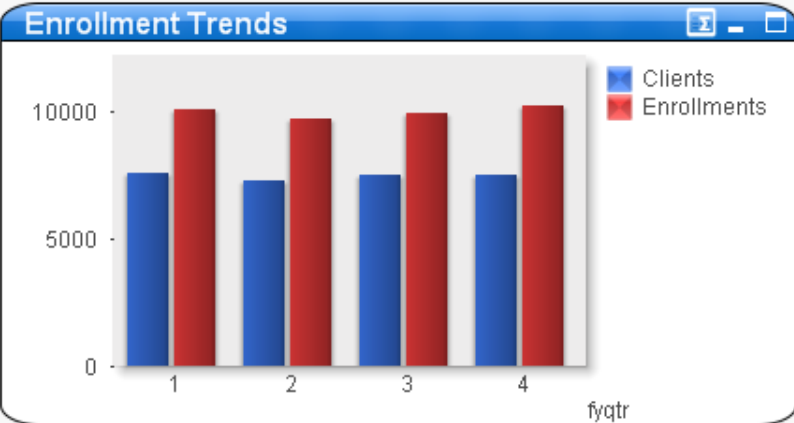


Note: width of band on spline plot indicates the relative number of admissions (n).

Modality Dashboard Example

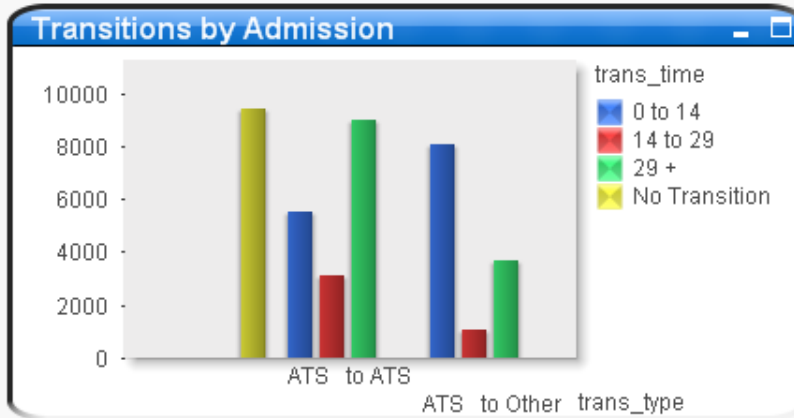


Prevent • Treat • Recover • For Life



Measures

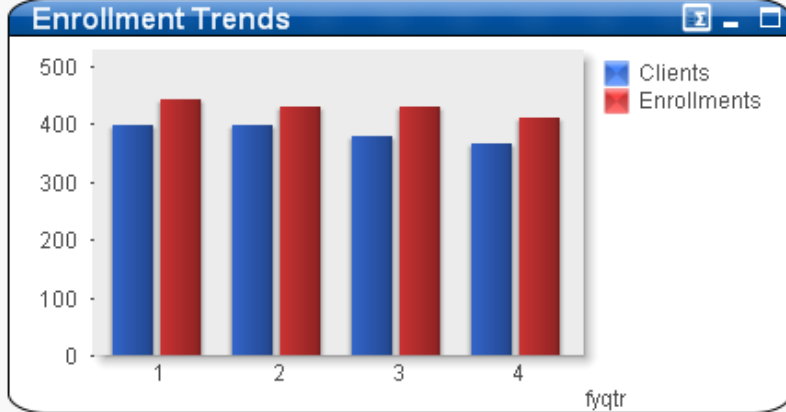
Program	Completed	AMA	Admin Disch	ALOS
	64%	28%	3%	4.50
Andrew House	61%	29%	7%	5.45
Bridge/Recovery	61%	34%	1%	4.44
Carlson Recovery	60%	31%	3%	3.90
McGee	70%	26%	1%	6.20
CAB - Boston	57%	36%	3%	3.53
CAB - Danvers	78%	18%	1%	4.43
Thayer	60%	26%	4%	4.13
Dimock	48%	38%	3%	4.04
Gosnold	70%	17%	1%	5.30
Cath. Ch./Brockton	55%	37%	6%	3.93
High Point	70%	23%	3%	4.65
Lowell CHI	62%	33%	4%	4.27
Providence	72%	24%	3%	5.21
Spectrum	72%	23%	3%	4.75
SSTAR	64%	29%	1%	5.22



Program Dashboard Example

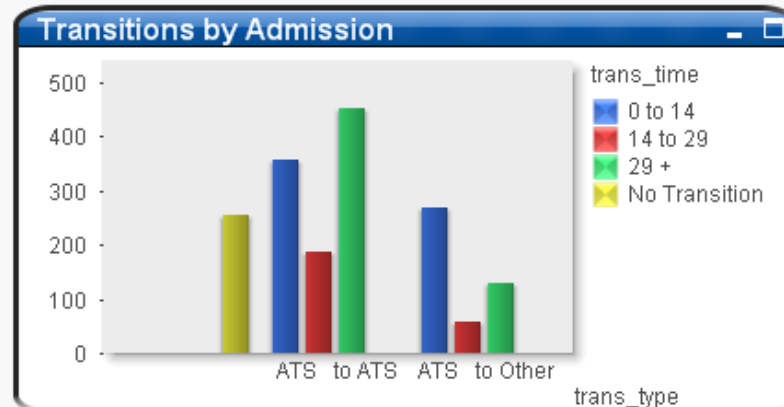
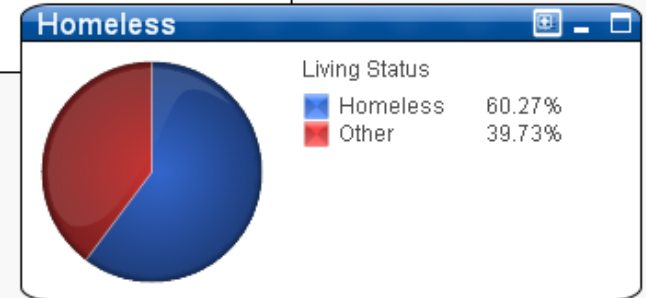
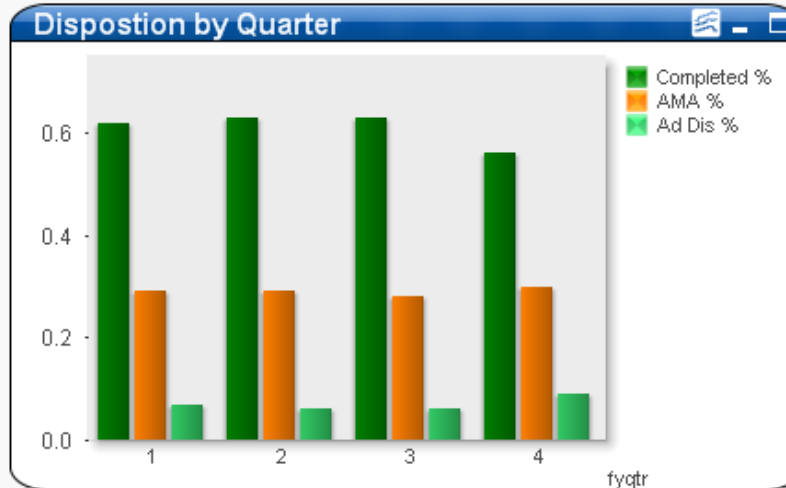
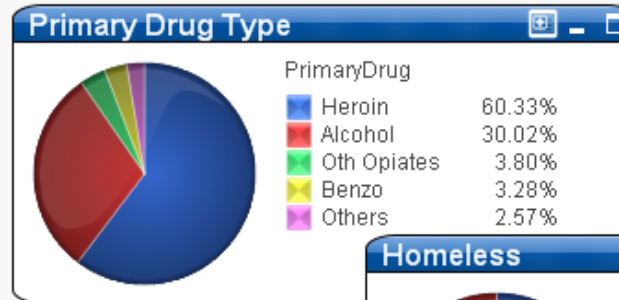


Prevent • Treat • Recover • For Life



Measures

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Measures and Incentive Structure



- AMA/completion rates for P4P
 - significant variation among programs
 - change-able
- Other outcomes monitored (transition)
- No “penalties” in initial phase
- Individual program targets based on uniform algorithm
- Other incentives beyond financial

Next Steps

- Identify and control for major differences in program level data
- Completion of Provider and Systems Dashboard
- Begin to identify best practices
- Define incentive structure
- July 1, 2008 – begin six month pilot
- January, 2009 – begin P4P